PTO/SB/06 (07-06) Approved for use through 1/31/2007, OMB 0651-0032

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/599,929			ing Date 13/2007	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)								OTHER THAN SMALL ENTITY OR SMALL ENTITY					
FOR NUMBER FILE					NUMBER EXTRA			RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
×	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A			N/A			N/A	300	
\boxtimes	SEARCH FEE (37 CFR 1.16(k), (i),	or (m))	N/A		N/A			N/A			N/A	500	
\boxtimes	EXAMINATION FE (37 CFR 1.16(o), (p),	E or (q))	N/A		N/A			N/A			N/A	200	
	FAL CLAIMS CFR 1.16(i))		72 minus 20 =		· 52			x \$ =		OR	X \$50 =	2600	
	EPENDENT CLAIM CFR 1.16(h))	is	2 minus 3 =		• 0			x \$ =			X \$200 =	0	
If the specification and drawings exceed 100 (sheets of pager, the application size fee due is \$250 (\$125 for small entity) for each additional 30 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(3) and 37 CFR 1.16(a).						n size fee due for each i thereof. See							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))													
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL		ı	TOTAL	3600	
APPLICATION AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY													
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOL PAID FOI	₹ JSLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))		Minus	*				x \$ =		OR	x s =		
	Independent (37 CFR 1.16(h))	•	Minus	***				x \$ =		OR	x s =		
	Application Size Fee (37 CFR 1.16(a))									Ш			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))									OR		l	
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
		(Column 1)		(Colum	n 2)	(Column 3)							
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16())		Minus					x \$ =		OR	x s =		
	Independent (37 CFR 1.16(h))		Minus	***				x \$ =		OR	x \$ =		
	Application Size Fee (37 CFR 1.16(s))												
Ą	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
Γ										OR	TOTAL ADD'L FEE		
**	If the entry in column 1 is less than the entry in column 2, write 0" in column 3. If the "Highest Number Previously Paid For IP NTIBS SPACE is less than 20, enter "20". If the "Highest Number Previously Paid For IP NTIBS SPACE is less than 3, enter "20". If the "Highest Number Previously Paid For IP NTIBS SPACE is less than 3, enter "20". If the "Highest Number Previously Paid For IP NTIBS SPACE is less than 3, enter "20". If the "Highest Number Previously Paid For IP NTIBS SPACE is less than 3, enter "20". If the "Highest Number Previously Paid For IP NTIBS SPACE is less than 3, enter "20". If the "Highest Number Previously Paid For IP NTIBS SPACE is less than 3, enter "20". If the "Highest Number Previously Paid For IP NTIBS SPACE is less than 3, enter "20". If the "Highest Number Previously Paid For IP NTIBS SPACE is less than 3, enter "20". If the "Highest Number Previously Paid For IP NTIBS SPACE is less than 3, enter "20". If the "Highest Number Previously Paid For IP NTIBS SPACE is less than 3, enter "20". If the "Highest Number Previously Paid For IP NTIBS SPACE is less than 3, enter "20". If the "Highest Number Previously Paid For IP NTIBS SPACE is less than 3, enter "20". If the "Highest Number Previously Paid For IP NTIBS SPACE is less than 3, enter "20". If the "Highest Number Previously Paid For IP NTIBS SPACE is less than 3, enter "20". If the "Highest Number Previously Paid For IP NTIBS SPACE is less than 3, enter "20". If the "Highest Number Previously Paid For IP NTIBS SPACE is less than 3, enter "20". If the "Highest Number Previously Paid For IP NTIBS SPACE is less than 3, enter "20". If the "Highest Number Previously Paid For IP NTIBS SPACE is less than 3, enter "20". If the "Highest Number Previously Paid For IP NTIBS SPACE is less than 3, enter "20". If the "Highest Number Proviously Paid For IP NTIBS SPACE is less than 3, enter "20". If the "Highest Number Proviously Paid For IP NTIBS SPACE is less than 3, enter "20". If the "Highest Number Proviously Paid For IP N												

This collection of information is equated by 37 CER. 1.16. The information is required to obtain or retain a bearful by the public which his lost line face by the USFTO to monoceal an implication. Confidentially is governed by 80 Sec. 22 and 37 CER 1.16. This collection is extensive the size of a window properties, and submitting the completed application form to the USFTO. Time well very depending upon the individual case. Any comments on the amount of time you require to complete this form and/or seggescions for reducing this burdon, should be sent to the CERT information Cificar. U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandrius, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandrius, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandrius, VA 22313-1450.